

# VIRGINIA HIV PREVENTION EVALUATION SYSTEM

## ❖ Follow-Up Referral Form ❖

### Table X7 PEMS-Compliant Version 2.0

Intervention Code & Name:

PEMS ID \_\_\_\_\_

(generated by PEMS)

Participant Identifier: \_\_\_\_\_

**X701.** Initial Referral Code (PEMS-generated): \_\_\_\_\_

**X702.** Initial Referral Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Mon/ Day/ Year

**X706.** Referral Outcome

- ☐ Pending
- ☐ Confirmed – Accessed service
- ☐ Confirmed – Client did not access service
- ☐ Lost to follow-up (mark this if no word has been received after 60 days)
- ☐ No follow-up

**X710.** Referral Close Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Mon/Day/ Year